

Senator Mark Kirk Internship Application



Application Check List

Internship Application (page 3)
Washington, D.C. Question and Answer (page 4)
Recommendation form completed by two non-family references (page 5) Letters of recommendation are still accepted in lieu of the recommendation form
Current Resume
Cover Letter or Writing Sample (writing samples should be no more than 2 pages)



Internship Application: Washington, D.C. and Illinois State Offices (PLEASE PRINT CLEARLY)

Office Applying	For (Circle One):	Washington, D.C	Chicago	Springfield	
Session Applyin	g For (Circle One):	Winter 2012 Sp	oring 2013 S	ummer 2013 Summer I	Summer II
				y 31 (DC), January 3 – May sion II: July 16 – August 3	
		Personal	Information		
First Name: _		Middle Init	ial: Las	t Name:	
Current or Sc	hool Address:				
Permanent Ac	ddress:				
Cell and Hom	Cell and Home Number: E-mail Address:				
Name of Pare	ent(s):				
			ucation		
Current Colle	ge or University	:			
Major:	fajor: Expected Graduation: Current G.P.A.:				
Extra curricul	lar activities, hor	nors or awards:			
I understand tha	t I am applying for a *Students receiving ed *It is p		ilability I will be availab check with their e work at least 3 full	le to work hours ducational institutions for requ days per week*	per week. uirements*
Monday	Tuesday	_ Wednesday	Thursday	Friday	
				e best of my knowledge. ne being rejected from th	
Signature:			Date:		

*This page is to ONLY be completed by applicants applying for a Washington, D.C. position. *

Interns are placed with legislative assistants to help ascertain a better understanding of legislative issues. Please select three legislative areas of interest to you and explain why below:

An internship on Capitol Hill is an excellent way for college students to learn first hand how the legislative branch of the federal government operates, while gaining critical job training skills in a fast-paced, exciting work environment. Please explain how this internship will help you with your future career goals.



Internship Recommendation Form (PLEASE PRINT CLEARLY)

Applicant's Name:	Your Name:							
How long have you known the applicant:								
Are you related to the applicant:	If so, how:	If so, how:						
In what capacity have you known the applicant	:							
I do not waive my right of access this recommendation		ive my right o	of access to t	his				
Applicants Signature	-	Date						
Please fill out the form based on the characteristics you have observed in comparison to other students you have taught or employees you supervised.								
Demonstrates critical thinking and analytical skills	Below Average	C	Above Average	Superior				
Organizational skills								
Writing skills								
Ability to adapt to new challenges								
Works well with others in a team setting								
Works well under pressure								

Please describe your interactions with the applicant. Interns are sometimes asked to research and write information on upcoming legislation. Please describe a time when you witnessed the applicant excel on a project similar in nature.					
directly with them to gain a better tability to interact with others in a g	assistants in issue areas that they have chosen and often work understanding of the issue. Please comment on the applicant's group situation.				
·	ters of support or other documents to this form. Date:				
	Organization:				
To be considered complete, ALL a	pplication materials must be submitted. For Washington, D.C. security procedures, applications submitted by mail may take				
For Washington, D.C. positions ple	ease return the form to our Intern Coordinator				
524 Hart Senate Office Building, V Email: <u>internship@kirk.senate.gov</u>	Vashington D.C. 20510 P: (202) 224-2854 F: (202) 228-4611				
For Chicago and Springfield IL pos	sitions please return this form to our Intern Coordinator				
230 S. Dearborn, Suite 3900, Chica	ago, IL 60604 P: (312) 886-3506 F: (312) 886-2117				